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		04/01/96	04/01/97	
Procedure		Maximum	Maximum	
Code	Procedure Description	Payment	Payment	
Prolonged S	ervices			
-	hysician Service with Direct ce) Patient Contact			
99354	Prolonged physician service in office or other outpatient setting requiring direct patient contact beyond the usual service; first hour	NMB	NMB	
99355	Each additional 30 minutes	NMB	NMB	
	hysician Service without e-to-Face) Patient Contact			
99358	Prolonged evaluation and manage- ment service before and/or after direct patient care; first hour	NMB	NMB	
99359	Each additional 30 minutes	NMB	NMB	

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Healthy Kids (EPSDT) Reimbursement Schedule

PROCEDURE CODE	DESCRIPTION	EFFECT. 04/15/95 UNIT VALUE	04/15/95 NET PAYMENT	EFFECT. 10/01/96 UNIT VALUE	10/01/96 NET PAYMENT
S09006	EPSDT EXAM WITHOUT IMMUNIZATIONS	11.00	\$54.89	11.00	\$56.21
S09007	EPSDT FAMILY PLANNING	5.70	28.44	5.57	28.46
S09008	EPSDT EXAM W/ FAMILY PLANNING	16.70	83.33	16.57	84.67
S09010	EPSDT ONE IMMUNIZATION	1.85	9.23	1.81	9.24
S09011	EPSDT EXAM WITH ONE IMMUNIZATION	12.88	64.27	12.81	65.45
S09012	EPSDT TWO IMMUNIZATIONS	3.69	18.41	3.61	18.44
S09013	EPSDT EXAM WITH TWO IMMUNIZATIONS	14.69	73.30	14.61	74.65
S09014	EPSDT THREE IMMUNIZATIONS	5.54	27.64	5.41	27.64
S09015	EPSDT EXAM WITH THREE IMMUNIZATIONS	16.54	82.53	16.42	83.90
309016	EPSDT FOUR IMMUNIZATIONS	7.38	36.82	7.22	36.89
S09017	EPSDT EXAM WITH FOUR IMMUNIZATIONS	18.38	91.71	18.23	93.15
S09018	EPSDT FIVE IMMUNIZATIONS	9.23	46.05	9.03	46.14
S09019	EPSDT EXAM WITH FIVE IMMUNIZATIONS	20.23	100.94	20.03	102.35
S09020	EPSDT EXAM W/ FAM PLAN W/ 1 IMMUN	18.55	92.56	18.37	93.87
S09021	EPSDT EXAM W/ FAM PLAN W/ 2 IMMUN	20.39	101.74	20.18	103.11
S09022	EPSDT EXAM W/ FAM PLAN W/ 3 IMMUN	22.24	111.72	21.98	112.31
S09023	EPSDT EXAM W/ FAM PLAN W/ 4 IMMUN	24.08	119.76	23.79	121.56
S09024	EPSDT EXAM W/ FAM PLAN W/ 5 IMMUN	25.93	129.39	25.60	130.81

EPSDT = Early & Periodic Screening, Diagnosis and Treatment

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Procedure <u>Code</u>	Procedure Description	04/01/96 Maximum Payment	04/01/97 Maximum Payment
Preventativ New Patient	e Medicine Services		
99381	Initial evaluation and management of healthy individual requiring a comprehensive history, a comprehensive examination, the identification of risk factors, and the ordering of appropriate laboratory/diagnostic procedures; new patient; infant (age under 1 year)	*\$ 54.89 *Covered under Ea Periodic Screenin Diagnostic and Treatment Program (Healthy Kids) wi special payment c S09006	g
99382	early childhood (age 1 through 4 years)		See 99381
99383	late childhood (age 5 through 11 years)		See 99381
99384	adolescent (age 12 through 17 years)		See 99381
	Established Patient		
99391	Periodic preventive medicine reeval		See 99381
99392	early childhood (age 1 through 4 years)		See 99381
99393	late childhood (age 5 through 11 years)		See 99381
99394	adolescent (age 12 through 17 years)		See 99381
	and/or Risk Factor Reduction Intervention blished Patient		
Preventativ	e Medicine, Individual Counseling		
99401	Counseling and/or risk factor reduction intervention(s) provided to healthy individual; approximately 15 minutes	*\$ 27.05 Benefit limited to Family Plannin	\$ 27.69
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Procedure Code	Procedure Description	04/01/96 Maximum Payment	04/01/97 Maximum Payment
99402	approximately 30 minutes	NMB	NMB
99403	approximately 45 minutes	NMB	NMB
99404	approximately 60 minutes	NMB	NMB
Preventative	e Medicine, Group Counseling		
99411	Counseling and/or risk factor reduction intervention(s) provided to healthy individuals in a group setting; approximately 30 minutes	NMB	NMB
99412	approximately 60 minutes	NMB	NMB
Other Preven	ntative Medicine Services		
99420	Administrative and interpretation of health risk assessment instrument (e.g., health hazard appraisal)	NMB	NMB
99429	Unlisted preventative medicine service	NMB	NMB
Newborn Car	e e		
99432	Normal newborn care in other than hospital or birthing room setting, including physical examination of baby and conference(s) with parent(s)	\$ 52.39	\$ 53.65
Medicine			
Immunization	ns (reimbursed only for Healthy Kids (EPSDT)		
90700	Immunization, active; diphtheria, tetanus toxoids, and acellular pertussis vaccine (Dtap)	RNS	RNS
90701	Immunization, active; diphtheria and tetanus toxoids and pertussis vaccine (Dtap)	\$ 26.04	\$ 26.67
90702	Diphtheria and tetanus toxoids (DT)	\$ 5.98	\$ 6.13
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Procedure <u>Code</u>	Procedure Description	04/01/96 Maximum Payment	04/01/97 Maximum <u>Payment</u>	
90703	Tetanus toxoids	\$ 5.53	\$ 5.67	
90704	Mumps virus vaccine, live	\$ 21.95	\$ 22.48	
90705	Measles virus vaccine, live	\$ 20.00	\$ 20.49	
90706	Rubella virus vaccine, live	\$ 20.65	\$ 21.15	
90707	Measles, mumps and rubella virus vaccine, live	\$ 36.52	\$ 37.40	
90708	Measles and rubella virus vaccine, live	RNS	RNS	
90709	Rubella and mumps virus vaccine, live	\$ 29.44	\$ 30.14	
90710	Measles, mumps, rubella, and varicella vaccine	RNS	RNS	
90711	Diphtheria, tetanus, and pertussis (DTP) and injectable poliomyelitis vaccine	RNS	RNS	
90712	Poliovirus vaccine, live, oral (any type(s))	RNS	RNS	
90713	Poliomyelitis vaccine	\$ 23.65	\$ 24.22	
90714	Typhoid vaccine	\$ 4.79	\$ 4.90	
90716	Varicella (Chicken Pox) vaccine	\$ 25.89	\$ 50.38	
90717	Yellow fever vaccine	\$ 50.59	\$ 51.81	
90718	Tetanus and diphtheria toxoids absorbed	RNS	RNS	
90719	Diphtheria toxoids	RNS	RNS	
90720	Diphtheria, tetanus, and pertussis (DTP) and Hemo-philus influenza B (HIB) vaccine	\$ 9.78	\$ 10.01	

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Procedure <u>Code</u>	Procedure Description	04/01/96 Maximum Payment	04/01/97 Maximum Payment	
90721	Diphtheria, tetanus toxoids, and acellular pertusis (DTaP) Vaccine and Hemophilus influenza B(HIB) Vaccine	RNS	RNS	
90724	Influenza virus vaccine AWP - 10 + administration fee. Adjusted annually in Fall.	\$ 10.98	\$ 8.13	
90725	Cholera vaccine	\$ 5.63	\$ 5.77	
90726	Rabies vaccine	\$ 54.34	\$ 55.64	
90727	Plague vaccine	RNS	RNS	
90728	BCG vaccine .	\$ 30.28	\$ 31.01	
90730	Hepatitis A vaccine		\$ 21.76	
90732	Pneumococcal vaccine, polyvalent	\$ 18.06	\$ 18.49	
90733	Meningococcal polysaccharide vaccine (any group(s)	\$ 55.58	\$ 56.92	
90737	Hemophilus influenza B	\$ 22.50	\$ 23.04	
90741	Immunization, passive; immune serum globulin, human (ISG)	RNS	RNS	
90742	Specific hyperimmune serum globulin (eg, hepatitis B, measles, pertussis, rabies, Rho(D), tetanus, vaccinia, varicella-zoster)	RNS	RNS	
90744	Immunization, active hepatitis B vaccine; newborn to 11 years	RNS	RNS	
90745	11-19 years	RNS	RNS	
90749	Unlisted immunization procedure	RNS	RNS	

*Indicates State Devised Code

RNS = Rate not set NMB = Not a Medicaid Benefit

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ASSURANCES

Nevada Medicaid assures its recipients have access to appropriate obstetrical and pediatric services. The following information substantiates this assertion.

There are a total of 2,906 physicians, including osteopaths, licensed to practice in Nevada. Nevada Medicaid had 2,315 participating instate physician providers during 1996. There are a total of 794 physicians in Nevada who specialize in Family Practice, OB/GYN, or Pediatrics. Eighty percent, 638 providers, participated in the Nevada Medicaid program. In April 1997, approximately 38.7% of the TANF, CHAP and Aged eligible population were enrolled in a managed care program, including the new Medicaid HMOs.

As the data shows, physician services are available to Medicaid recipients statewide with the exception of Eureka, Esmeralda and Storey counties. There are no physicians practicing in these counties. Recipients obtain services in adjacent counties.

Douglas County is a rural county adjacent to the City and County of Carson City and its principal towns are within 20 miles of Carson City. Residents of Douglas County use the obstetrical and pediatric services available in Carson City. An urgent care center and medical office building opened in the fall of 1994. The medical complex is owned by a South Lake Tahoe, California hospital and the physicians split their time between the states.

In Carson City, Carson Tahoe Hospital and the city's obstetricians provide obstetrical services through the Maternal Obstetrical Management Services (MOMS) program. They service Carson City, Douglas, Lyon and Storey Counties.

In rural counties without obstetrical and/or pediatric providers, the family or general practitioners provide these services or recipients obtain services in adjacent counties.

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NEVADA/MEDICAID PHYSICIANS NEVADA/MEDICAID OB AND PEDIATRIC PROVIDERS

County	NV Licensed Physicians _12/31/96	Medi- caid Full Part.	NV Family Practice	Medicaid Family Practice	NV OB/GY1N	Medicaid OB/GYN	NV <u>Pediat.</u>	Medicaid Pediat.
Churchill	23	22	9	8	2	2	2	2
Clark	1,878	1,470	292	184	107	100	117	109
Douglas	46	36	15	7	4	4	1	1
Elko ⁵	43	44	6	5	4	6	4	6
Esmeralda	0	0	0	0	0	0	0	0
Eureka ⁴	0	0	0	0	0	0	0	0
Humboldt	10	7	6	6	o	0	0	0
Lander ⁴	2	2	1	1	0	0	0	0
Lincoln	3	2	1	1	0	0	0	0
Lyon	7	12	5	9	0	0	0	0
Mineral	7	4	5	4	0	0	o	0
Nye4	13	. 15	5	7	0	o	o	0
Carson	112	94	21	13	5	6	6	5
Pershing	0	3	0	2	0	0	0	0
Storey	0	0	0	0	0	0	0	0
Washoe4	756	589	101	70	32	40	37	34
White Pine	e 8	15	4	6	1	0	1	0

See next page for Notes to Physician Enrollment Schedule.

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Notes to Physician Enrollment Schedule:

- In some instances, physicians are licensed and Medicaid enrolled in one county but also practice in an adjacent county (e.g., Douglas and Carson). The primary medical group in Elko county contracts with out-of-state locum tenens to expand their physician base.
- Nevada Medicaid is not able to determine whether participating physicians are MDs or DOs. The figures in this column represent physicians (MDs and DOs) who have received payment for services during calendar year 1995.
- These figures represent enrolled providers.
- ⁴ Nevada Rural Health Centers, Inc (NRHC) has a federally qualified health center (FQHC) site in the following three counties: Lander, Eureka, and Washoe counties and two sites in Nye county.
- Family Health Services (FHS) of Idaho has established an FQHC in Jackpot, NV which serves the families in the northeastern part of Elko county.

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